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Bib Data Sheet

CONFIRMATION NO. 6098

|                             |                                       |              |                        |                                      |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>09/893,960 | FILING DATE<br>06/29/2001<br><br>RULE | CLASS<br>370 | GROUP ART UNIT<br>2666 | ATTORNEY<br>DOCKET NO.<br>040000-758 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/216,037 07/03/2000

Ra 7/14/03

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

none Ra 7/14/03

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 08/20/2001

|  |  |                                |                         |                       |                            |
|--|--|--------------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions<br>met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>HUNGARY | SHEETS<br>DRAWING<br>16 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>3 |
| Verified and<br>Acknowledged                                   | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature <i>Ron Chelton</i> Initials <i>RA</i> |                                |                         |                       |                            |

## ADDRESS

27045  
 ERICSSON INC.  
 6300 LEGACY DRIVE  
 M/S EVR C11  
 PLANO, TX  
 75024

## TITLE

Lagrange quality of service routing

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>840 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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